

□ (Optional) Fax copy (\$4) #_

WORKSHEET FOR SANITARY CERTIFICATE FOR EXPORTS

Export Worksheet for processed eggs and/or egg foods that are regulated by the FDA intended for human consumption.

Consignor/Exporter (name and address): MF Inc. 123 Street Anywhere, MN 55305	Consignee/Importer (name and address): MacDowells Restaurants Mexico City, Mexico
State of Origin of Product(s):	Country of destination: ISO Code:
Minnesota, USA	MEXICO MX
Place of Loading: Anywhere, Minnesota 55305	Means of transport: Truck
Conditions of transport/storage: Refrigerated	Leclared point of entry (BIP): Laredo, USA
Producer/Manufacturer: MF Inc. 123 Street	Date of manufacturing: April 24, 2013
Anywhere, MN 55305	Type of packing: Corrugated fiber
Name of Products: Frozen diced whole eggs Frozen Egg Patties Number of Package 100 cases 150 cases	es: Product Production Code: Net Weight (lbs): 12295 20lbs/case 12995 40lbs/case
Signature of Applicant (I acknowledge the information is factuae Return Address: 123 Street Anywhere, MN 55305 Company Name: MF Inc.	al and accurate.) Date Billing Information: Company Name:MF Inc.
Contact Name: M. O'Conner	
Address: 123 Street	
City, State, Zip code: Anywhere, MN 55305	Point of Contact: M. O'Conner
Telephone: 651-201-6000	651-201-6000
\Box US Mail \underline{X} Courier label attached	Fax Number:651-201-6121

□(Optional) Internal Billing Reference _____